

STANDING STRONG

In this issue of *The Magazine of Sigma Chi*, we focus on mental health and how it impacts brothers. According to the World Health Organization, more than 450 million people have a mental illness. In the U.S., anxiety disorders impact 42 million adults, and while there are many types of depressive disorders, about 16 million adults live with major depression, according to the National Alliance of Mental Illness (NAMI).

Sadly, statistics show that only about half of those affected by mental illnesses receive treatment for them. The Sigma Chis featured in this issue, however, have sought treatment for their panic attacks, acute stress disorder and post-traumatic stress disorder (PTSD). Pre-med student Matthew Gold, **CENTRAL FLORIDA 2018**, at right, had his first panic attack while in class in January 2017, and with the support of others, is doing well as he studied for the MCAT at the time of this writing.

Scott Palomino, **TEXAS A&M-COMMERCE 2008**, experiences PTSD as a result of his time in Operation Iraqi Freedom in 2004 and is now the director of the Airmen and Family Readiness Center at Carswell Air Force Base near Fort Worth, Texas.

The support of family and friends has been important as these men cope with their mental illness. Just as Gold and Palomino have found that support from brothers, so, too, has Michael Zibilich, **LOUISIANA STATE 2013**, the father of Keller Zibilich, **LOUISIANA STATE 2015**, who lost his life to suicide in 2012. Michael Zibilich has spoken to chapters about his loss and mental health. He is working with the General Fraternity on a program that is expected to launch this fall to new members as a way to further educate them about mental health.

We hope you enjoy reading about these men and their efforts in this issue.



A man in a blue polo shirt is shown in profile, looking out a window. The background is a brick wall. The title "LEARNING TO BREATHE" is overlaid on the image. "LEARNING" is in large, orange, distressed capital letters. "TO BREATHE" is in large, white, distressed capital letters.

LEARNING TO BREATHE

When panic attacks arise while preparing for his future, a medical student must accept a new challenge — facing his mental health.

By Susan Lorimor
Photos by Logan Robertson

In February 2017, pre-med student Matthew Gold, **CENTRAL FLORIDA 2018**, sat in a physics lecture, when suddenly his left arm hurt, his Apple Watch registered his heart racing at 121 beats per minute and he was short of breath. He was confused and scared: He thought he was having a heart attack.

The symptoms subsided, and Gold went to a physician assistant and later a doctor, who both confirmed that he had a panic attack.

He received medication to control the panic attacks, and because not all drugs treat symptoms well for everyone without side effects, he worked with his doctor during the following months to learn what was best for him.

Gold is one of many college students who have recently sought



Left to right: 1. Pre-med student Matthew Gold, **CENTRAL FLORIDA 2018**, stands with his grandfather Phil Speyer of Scottsdale, Arizona, at a basketball game. Gold, who has anxiety, has found support from Speyer in facing his mental health. 2. After Gold had his first panic attack in January 2017, he worked with his doctor to find the medication that works best for him to alleviate symptoms. 3. Gold studies for the MCAT at the University of Central Florida chapter house on Feb. 27, 2018. 4. Gold, at left, speaks with chapter brother Andres Dobov, **2019**, at their Derby Days philanthropic event at the chapter house on Feb. 27, 2018.



REACTIONS FORM EMOTIONAL RESPONSES

When faced with a difficulty in life, or a bump, a person can react in five ways, which determines whether they will become anxious, depressed, angry or feel another emotion, says Susan Heitler, Ph.D., a Denver clinical psychologist and author of *Prescriptions Without Pills: For Relief from Depression, Anger, Anxiety and More*.

"You'll know you've hit a bump if you feel a negative emotion," she says.

If someone wants to fold when they experience a challenge rather than finding solutions to it, they will become depressed; if they instead want to flee, they may try to escape it by drinking or hooking up with others; if they fight, they will become angry; if they freeze, they will become anxious; and if they instead find solutions to the problem, they will be on a path to positive well-being.

"Anxiety means the brain has stopped problem-solving," Heitler says of one of the outcomes of her "bump theory."

She adds that when a person senses or knows their friend is anxious, the best thing they can do is ask that friend questions to help him or her get to the root cause of it, and prompt them to create solutions to alleviate the anxiety. "Don't try to fix things," she says.

treatment for mental health concerns. According to the Center for Collegiate Mental Health, anxiety remained the top self-presenting concern for students who visited their college's counseling center during the 2016 to 2017 academic year, and the incidence rates have risen for four straight years. During the 2013 to 2014 academic year, 19.6 percent of clinicians reported that students said anxiety was a primary cause for their visit to a counseling center; in the 2016 to 2017 school year, it was 24.1 percent.

When Gold had his first panic attack, he was in a class taught by a professor from whom he wanted a letter of recommendation for his medical school application. He was driven to do well. The panic attacks made it difficult for Gold to focus, yet he received the highest grade in class that summer.

"It's the full-on fight-or-flight response," Gold says of the symptoms he feels when anxiety comes on when he is studying.

He has learned coping mechanisms for responding to what is happening, and says that with his first panic attack, he was able to mask it so that it went unnoticed by others.

When Gold began to experience panic attacks, he wondered how it would impact his career. "I had trouble accepting it," he says of the condition. "I thought, 'If I want to be a doctor, how will I do it with panic [attacks]?'"

Gold decided he wanted to be a doctor his freshman year of college. Before that, he had wanted to be a lawyer, like his father, who also works in a stressful environment. When Gold told his father and his grandfather about his mental health, they were supportive.

"It brought me back because I have suffered panic attacks for quite a while," says Gold's grandfather, Phil Speyer of Scottsdale, Arizona.

Speyer, a Holocaust survivor, was focused on survival during his earlier years of life, but later on, recognized there was anxiety in his life. "Eventually some of these panicky things [would] happen," Speyer says. "It was anxiety."

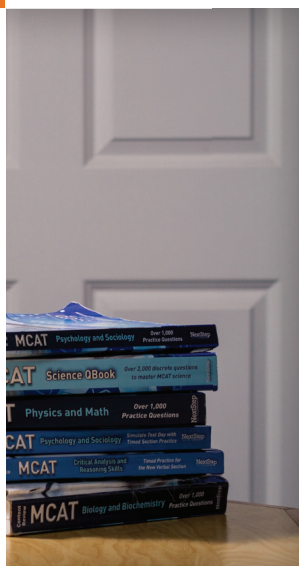
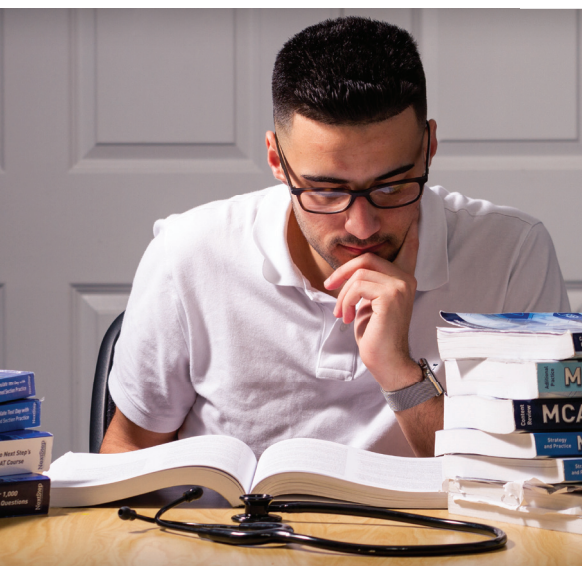
Now, with an irregular heartbeat and trips to the Mayo Clinic, he occasionally suffers from anxiety. Once, he passed out in public, for which he felt embarrassed. As a result, at times he is now anxious to leave the house for social plans.

Speyer acknowledges that the sources of anxiety that he and Gold have experienced differ, but he is there to listen to his grandson. "I don't know how to do anything but be supportive," Speyer says.

He says that Gold, whom he describes as serious, has had to sacrifice his social life because of the demands he faces. Yet, Gold has made time to be involved with his chapter and in various other campus organizations, while studying and shadowing professionals within six medical professions.

Speyer says that Gold has been building an impressive resume, and that it will help him when it comes time to select a medical school. However, the focus on getting into a good school is part of what can add to the anxiety levels of students, says Susan Heitler, Ph.D., a Denver clinical psychologist and author of *Prescriptions Without Pills: For Relief from Depression, Anger, Anxiety and More*. "In high school, students get low-level anxiety about getting into the right college," she says, explaining that gets transferred in college into getting the right job after graduation. "It's in the air. It's contagious."

For Gold, it is apparent that getting into a good medical school is a main stressor, especially as he prepared to take the Medical College Admissions Test in April, then apply to schools in May. To help cope with the anxiety, he takes medication. Gold does not want his body to become



dependent upon it, so he takes a small dose. As a pre-med student, he knows that the traditional anti-anxiety medications are highly addictive.

Heitler says that as a result, more doctors are prescribing antidepressants for anxiety as opposed to drugs such as benzodiazepines, the most common class of anti-anxiety drugs. She says this is in part because common benzodiazepines, such as Xanax and Valium, are highly addictive.

While Heitler says in *Prescriptions Without Pills* that medication is generally a first and essential step in treating the mania and severe depressions of bipolar illness, schizophrenia and psychotic disorders, she is reluctant to regard medication as a first line of treatment for anxiety or mild-to-moderate depression. In those cases, therapy can be equally or more effective than medication, without the potential side effects, she writes.

Gold says that he went to a therapist a couple of times after he was diagnosed with panic attacks and that it was helpful. He says that it taught him coping skills, which he utilizes when he feels the attacks coming on. For a while, he was having one about every day. Now, he knows to pause and to take deep breaths.

He also realizes he needs to slow down. "What I've learned with a panic disorder is that I have to take time for myself," he says, adding he bought an annual pass to Disney World as a result.

It is an improvement from where he was when the panic attacks began, when it seemed he could simply work out to relieve his stress.

He is also speaking more openly about mental health than ever before.

"When I opened up about it in my chapter, all of the brothers gave me strong arms [of support]," he says of telling them his challenges. "Support is literally inherent [to improving your] mental health."

WHAT IS CREATING INCREASED LEVELS OF ANXIETY?

According to the Center for Collegiate Mental Health, anxiety has been the most common cause for students to visit their college counseling center for the past four years and the incidence of such visits continues to rise. While this may mean that students are more comfortable seeking help, it can also signal greater concerns. Below, experts offer explanations as to what is fueling students' anxiety.

Societal pressures

Those entering college are facing increasing demands to perform well. "There is this sense that if you don't achieve, you're a failure," says Vic Schwartz, M.D., chief medical officer for the Jed Foundation. Additionally, students feel pressure to gain a decent education and land a good job that will allow them to pay their bills in an uncertain economy where the average student borrows \$45,800 to finance a bachelor's degree, according to the National Center for Education Statistics.

Lack of failure

Ironically, while students may believe they cannot succeed if they do fail, the opposite is true. The parents of many in college protected them throughout their life from stumbling, learning how to pick themselves up and solve problems when something goes wrong, say mental health professionals. That lack of life skills creates anxiety, according to Schwartz.

Need for connection

Students are isolating themselves when they're in their dorm rooms, relying on text messages to communicate with friends, says Susan Heitler, Ph.D., a Denver

clinical psychologist and author of *Prescriptions Without Pills*. "When texting, [you] probably get less of a shot of oxytocin," she says, explaining that the hormone that acts as a neurotransmitter in the brain is released when bonding with or hugging a friend. That oxytocin creates a sense of calmness, which can be the opposite of anxiety.

Social relationships

Heitler says a significant portion of students grew up in dysfunctional homes, meaning that they may not have had parents who taught them healthy relationship skills. As a result, these individuals may need to learn conflict-resolution skills and how to talk about sensitive topics with their peers. Learning these skills is important, as Heitler says that social relationships are probably their biggest source of anxiety.

Social media

People begin to compare their lives to the fun or exciting ones that they see others having on social media, feeling that theirs is lackluster. Additionally, they are concerned that people will write something bad about them on social media, and when they do, they get quite anxious, Heitler says.

OFFERING SUPPORT

Fraternity
Program Planned
to Educate New
Members About
Mental Health

Story by
John O'Brien

Photos by
John Fitzhugh

"There's nothing else left for us to do. We have no sons but you."

Those heartbreaking words from Michael Zibilich, **LOUISIANA STATE 2013**, speak not only to the grief that he and his wife, Gayle Zibilich, experience daily after losing their only son, but also to their continued commitment to Sigma Chi six years after his death.

Their son, Keller Zibilich, **LOUISIANA STATE 2015**, took his life on April 21, 2012, just weeks before he finished his freshman year at the university. In the wake of his death, the Fraternity launched Sigma Chi Lifeline, an online mental health resource that includes a hotline to trained crisis counselors, on March 4, 2014, to ensure that anyone in crisis will be able to talk to someone when they need help.

Now the Zibilichs and Sigma Chi are taking the next step, by developing a program called Strong Arms that is intended to bring awareness of mental health issues. The e-learning curriculum will launch in the fall of 2018 as a requirement for all new Sigma Chi undergraduates.

Zibilich and his family are passionate about putting the education in front of members, so they donated funds to create it.

Like Lifeline, Strong Arms was developed in partnership with the Jed Foundation, a nonprofit organization that works to promote emotional health and prevent suicide among young people. Victor Schwartz, M.D., chief medical officer for the foundation, calls the program basic training for Fraternity brothers on mental health issues. Jim Cogdal, **BRADLEY 2003**, the General Fraternity's senior director of membership development, says the curriculum will be assigned to new members through Sigma Chi U, parallel to their Preparation for Brotherhood pledge program learning.

Preliminary curriculum covers ways to promote one's own mental health, such as getting enough sleep, seeking interpersonal connections and engaging in personal reflection and meditation. It also seeks to give members the tools to know when everyday problems start to rise to the level of a mental health crisis, and how to seek help for it.

Men, especially young men, sometimes have a hard time asking for help, says Schwartz. That's where he and others say the brotherhood comes in. "Strong Arms will help reassure their friends, and brothers, that being a friend sometimes involves stepping in and getting someone help," Schwartz explains.

Indeed, Zibilich and Cogdal both pointed out how Sigma Chi are already educated on being their brother's keeper in a number of ways, such as watching for excessive drinking and behavior that contradicts the Fraternity's values. Strong Arms seeks to add mental illness to the discussion. "We also need to start looking out for the mental health of the brother who is sitting next to us in [a] chapter [meeting]," Cogdal says.

"Strong Arms will help reassure their friends, and brothers, that being a friend sometimes involves stepping in and getting someone help," Schwartz explains.

The Strong Arms curriculum is designed to empower users to identify warning signs of mental health distress and to do something about it, says Schwartz. "You don't need to be an expert or make



Above: Michael Zibilich, **LOUISIANA STATE 2013**, who lost his son to suicide in 2012, speaks to those at the Alabama/Gulf Coast and Southern province conference at the Biloxi Yacht Club in Biloxi, Mississippi, on Feb. 24, 2018. Zibilich spoke about his late son, Keller Zibilich, **LOUISIANA STATE 2015**, and how his death impacted him. As a result of Keller Zibilich's passing, his father is helping fund the Strong Arms program, which will educate those new to the Fraternity about mental health. Right: Magister Ryan Haak, **TULANE 2018**, listens to Michael Zibilich, **LOUISIANA STATE 2013**, speak about mental health at the Alabama/Gulf Coast and Southern province conference on Feb. 24, 2018, at the Biloxi Yacht Club in Biloxi, Mississippi.



a diagnosis," he explains. "You just have to know that something is wrong."

The very nature of Sigma Chi and its emphasis on brotherhood make members an ideal audience for the lessons of Strong Arms, Schwartz says. "The whole notion of this thing is based on people being connected to each other and supporting each other," he explains.

"We also need to start looking out for the mental health of the brother who is sitting next to us in [a] chapter [meeting]," Cogdal says.

The efforts with the program wouldn't be possible without the commitment of Michael and Gayle Zibilich, Cogdal says. "They're so passionate to make sure all Sigma Chi members who feel overwhelmed have an outlet for help," he explains.

The six years that have passed since Keller Zibilich's death have done little to ease the grief of his mother and father. "I still cry every day," Michael Zibilich says.

However, the work to develop programs like Lifeline and Strong Arms, along with the frequent public speaking Michael Zibilich does on the issues of mental health and suicide, help create a living legacy for a son he calls a blessing from God.

"We have a means now of making his life mean a lot to someone who will never meet him," Zibilich says. "There's going to be one kid in every audience [who] will get the message and it will save [his] life. In that, Keller will live in them."

To reach Sigma Chi Lifeline, call (800) 273-8255 or visit sigmachilife.org.ulifeline.org.

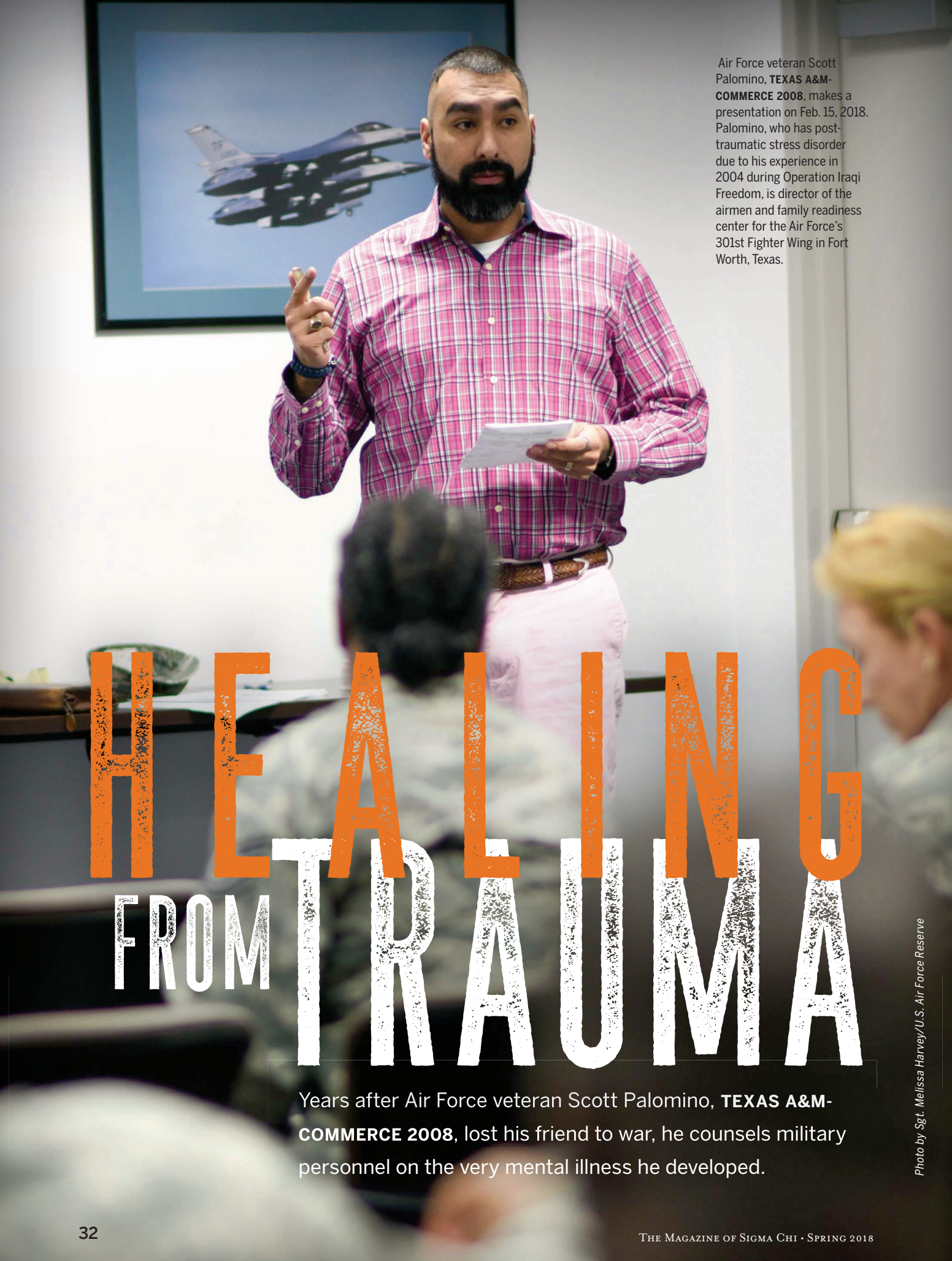
SHAME'S LINK TO DEPRESSION

While there are many factors that could contribute to depression, including genetics, clinical psychologist Mary Lamia sees shame as a primary component to it. Without remitting, the emotion can lead to depression, says Lamia, who is based in Kentfield, California.

She says that an intense stimulus, such as a student being around high achievers in college and realizing that, by comparison, he or she is not the top performer they were in high school, can bring about shame. "When shame is triggered in the present, we automatically and unconsciously [go back] to our internal warehouse [of past feelings of shame]," says Lamia, explaining that could be when a parent ignored a child who sought attention or care.

When a person feels shame, they do one of four things, Lamia says. They may go into withdrawal or avoidance, or they may attack themselves or become agitated, lashing out at others. It is the attacking of oneself that could lead to suicide, Lamia explains.

She says that understanding the responses to shame can help people know how to help their friends. For instance, if a friend is going out nightly to get drunk, it may be time to make a safe space to ask them what they have been avoiding. However, if someone is unable to get past the negative feelings on their own, they may need professional help. Of course, if they express the desire to end their life, do whatever you can to get them to a crisis center, Lamia says.

A full-page photograph of Scott Palomino, a man with a beard and mustache, wearing a pink and white plaid shirt and light pink pants. He is standing and gesturing with his right hand while holding a small piece of paper in his left. In the background, a framed picture of a fighter jet is on the wall. In the foreground, the backs of several audience members' heads are visible, slightly out of focus.

Air Force veteran Scott Palomino, **TEXAS A&M-COMMERCE 2008**, makes a presentation on Feb. 15, 2018. Palomino, who has post-traumatic stress disorder due to his experience in 2004 during Operation Iraqi Freedom, is director of the airmen and family readiness center for the Air Force's 301st Fighter Wing in Fort Worth, Texas.

HEALING FROM TRAUMA

Years after Air Force veteran Scott Palomino, **TEXAS A&M-COMMERCE 2008**, lost his friend to war, he counsels military personnel on the very mental illness he developed.

Photo by Sgt. Melissa Harvey/U.S. Air Force Reserve

By Ryan Rogers, WINDSOR 2005

Scott Palomino, **TEXAS A&M-COMMERCE 2008**, deployed as a weapons controller with his best friend Antoine Holt in the Air Control Squadron for Operation Iraqi Freedom in 2003. Together, they oversaw theater air control.

Palomino met Holt while on assignment at Aviano Air Base in Italy, and they became constant companions at work, at lunch, or playing basketball after each shift. Palomino's life suddenly changed in Balad, Iraq, on April 10, 2004, when a mortar blast cost him his leg and killed Holt.

While recovering at Walter Reed National Military Medical Center in Bethesda, Maryland, Palomino experienced uncontrollable sweating, breathing difficulties and frequent nightmares. He often found himself mumbling or talking to his lost friend, Holt, spotting his face everywhere he looked.

His injury forced a medical retirement from active duty in the Air Force, which felt like losing his identity – he'd trained hard for a career in the Air Force, where he'd planned to remain for 30 years. The dramatic life changes, nightmares and anxieties culminated in a post-traumatic stress disorder (PTSD) diagnosis in June 2004. The mental health condition can develop after one experiences or witnesses a traumatic event, such as war, sexual assault or a traffic collision; those suffering from it have dreams or flashbacks in which they relive the initial trauma, they avoid reminders of the event or thinking about it, may be easily startled or feel tense, and may have distorted feelings about the situation, such as guilt.

"[Traumatic memories] impact how [people with PTSD] think about themselves, the world and other people. They feel awful about themselves, [thinking] 'I'm crazy, lazy, bad, damaged and there's something wrong with me,'" says Joan Cook, Ph.D., associate professor of psychiatry at the Yale School of Medicine. "They think other people are dangerous, or awful, or won't understand them. And they think the world is an awful and dangerous place."

Those with PTSD are fearful that the traumatic situation may happen again. These feelings make building healthy relationships difficult because they impact people's ability to trust others, says Cook.

Needing to alter his life's path, Palomino registered for engineering courses at Texas A&M University-Commerce in 2005. Though he loved competing in athletics and dating, he worried people at college wouldn't pick him for sports, befriend him or date him. "I was going from the dorm to class, and right back to my dorm, every single day, not doing anything, just focusing on school," admits Palomino.

While sitting in class, a friend invited him to meet some other military men on campus, some of whom were Sigma Chis. Through them, he got to know the

Texas A&M-Commerce chapter and the Sigma Chi brotherhood. Palomino was offered and accepted a bid to join the chapter, willing to see what the Fraternity had to offer.

"My Big Brother, Eric Osburn, **2007**, he just invited me everywhere," recalls Palomino. "[He would say,] 'Hey Scott, come on! Don't stay in your room!' He became my Big Brother, and he was very instrumental in me joining Sigma Chi."

Moving forward

Having strong social supports significantly predicts recovery from PTSD, says Cook. Lucky for Palomino, he found such support through his brothers.

Michael Brower, **TEXAS A&M-COMMERCE 2006**, remembers that Palomino was quiet during his pledgship. "He was shy, and it took a little bit to lighten up," says Brower. "He had that traumatic injury happen to him, and he never thought he'd have another girlfriend, or another friend, or that he'd be accepted, but [what happened] was the total opposite."

"[Traumatic memories] impact how [people with PTSD] think about themselves, the world and other people. They feel awful about themselves, [thinking] 'I'm crazy, lazy, bad, damaged and there's something wrong with me,'" says Cook.

Travis Johnson, **TEXAS A&M-COMMERCE 2007**, admits to doing a "quadruple-take" when he first saw Palomino's prosthetic leg. "I'd never seen one," says Johnson, who met Palomino when they were both pledges.

The prosthetic remained a constant reminder for Palomino of his life-changing traumatic event, as it does today, but to overcome the PTSD, he had to make peace with it.

"It's an eye-catcher," admits Brower, "but it turned into a motivational symbol, and that's what he's known for."

Brower says the Sigs treated him no differently than they did anyone else within the chapter. Palomino's prosthetic was fair game in the chapter's good-natured brotherly ribbing. When he wore shorts during the Texas winters, brothers would joke that only one leg was getting cold.

"None of it was horribly mean, but the way Scott takes everything, he'd laugh about it, and send it back your way three times worse," says Brower.

The inclusive camaraderie and brotherhood



Above: Air Force veteran Scott Palomino, **TEXAS A&M-COMMERCE 2008**, lost his best friend Antoine Holt and a leg on April 10, 2004, during a mortar blast in Operation Iraqi Freedom. As a result, Palomino has post-traumatic stress disorder and left active duty in the military. He is now director of the airmen and family readiness center for the Air Force's 301st Fighter Wing in Fort Worth, Texas.

helped restore Palomino's trust and confidence. He went from being antisocial to being very social. Palomino says he accepted how his injury made him special. He embraces the prosthetic by getting a fresh design painted on its sockets, the part of it that attaches to his residual limb, when he replaces them. He turned one into a recruitment tool which reads, "Rush Sigma Chi."

Palomino began to hold chapter offices. He became social chairman, and says that he and Johnson "co-did" everything, including planning chapter social events. Their close friendship ultimately inspired Palomino to become Magister. He was also Pro Consul and Quaestor, and Interfraternity Council president. He switched his major from engineering to child psychology, and married the chapter's 2009 sweetheart, Amanda.

He's since received his master's degree in social work and has become a licensed social worker, helping veterans overcome PTSD. The "Rush Sigma Chi" socket sits on his desk at the 301st Airman and Family Readiness Center in Fort Worth, Texas, where he is director of airman and family readiness. In that role, he oversees 14 Air Force programs, including ones that help transition retiring military personnel to civilian life, and prepare service members and their families for the rigors that accompany life before, during and after deployment. Palomino says that it is with the latter program that the military spends a lot of time educating service members and their families about PTSD.

He also serves as board member for the Halo for Freedom Warrior Foundation, helping other wounded veterans reconnect and socialize with one another, building the same type of camaraderie that they would establish while serving in the military. The organization's mission is to help prevent suicides.

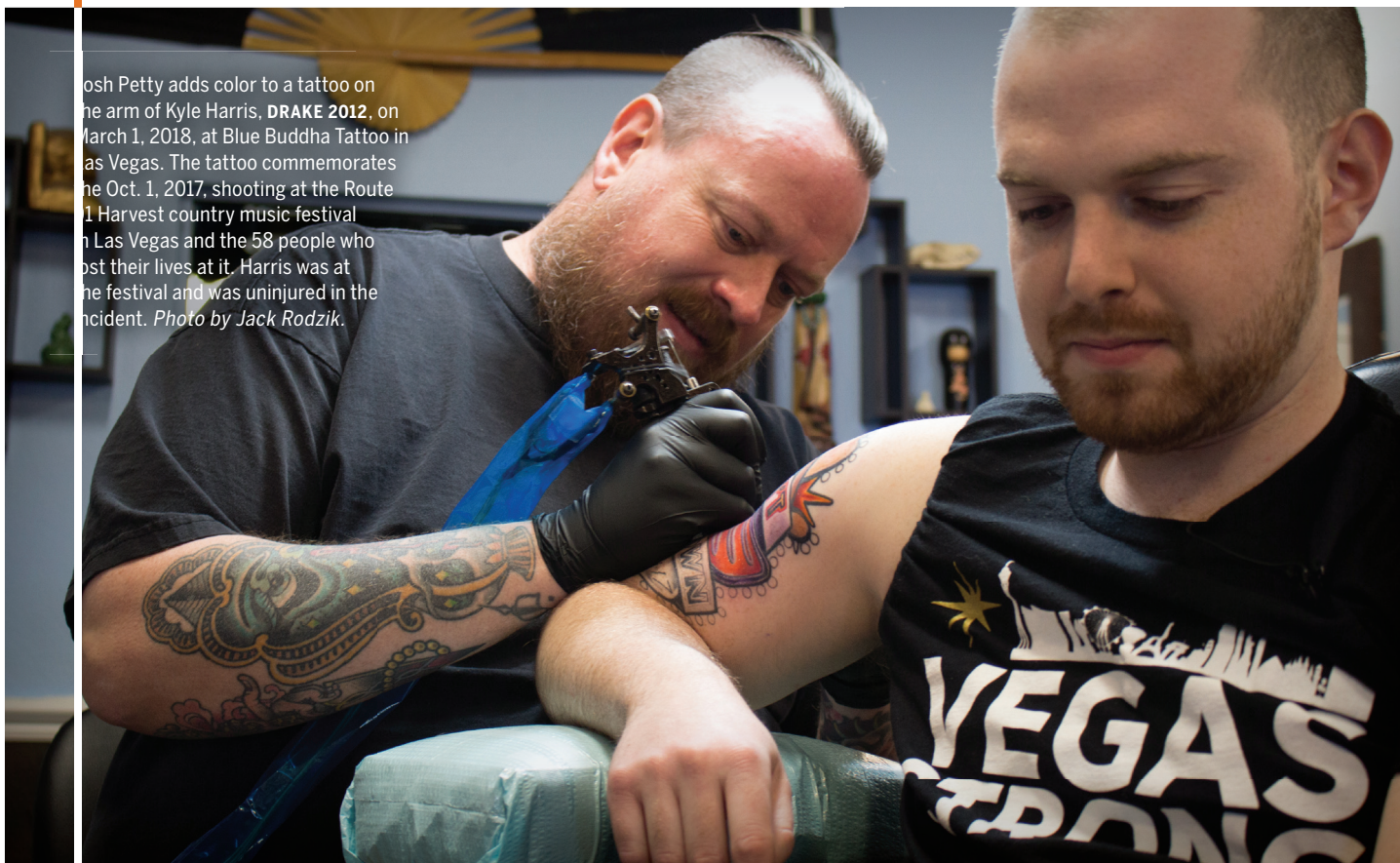
Palomino credits the relationships he built with the brothers at the Texas A&M-Commerce chapter for helping him emerge from his shell, which helped him become the man he is today. Those friendships endure. Brower officiated Palomino's wedding, and Johnson was his best man.

"It's crazy having seen him go from one extreme to the other," says Brower, adding that the once-shy man has become a talented public speaker. He talks about veterans' issues at nonprofit organizations' galas and fundraising events, and each Veterans Day and Memorial Day, he speaks to at least two high schools.

Palomino and Johnson remain in regular communication, and Johnson admits that whatever inspiration he gave to Palomino, he's received back threefold.

"I credit a lot of my life to Scott," says Johnson. "Any time I think about difficult times, if Scott's not available [to talk], I can always think of Scott and what he's overcome."

Josh Petty adds color to a tattoo on the arm of Kyle Harris, **DRAKE 2012**, on March 1, 2018, at Blue Buddha Tattoo in Las Vegas. The tattoo commemorates the Oct. 1, 2017, shooting at the Route 91 Harvest country music festival in Las Vegas and the 58 people who lost their lives at it. Harris was at the festival and was uninjured in the incident. Photo by Jack Rodzik.



A PERMANENT REMINDER

Three months after Kyle Harris, **DRAKE 2012**, survived the deadliest mass shooting in modern U.S. history, he grapples with the enormity of the event and his emotions.

"I was having hallucinations," Harris says of the time immediately following the Oct. 1, 2017, tragedy in which Stephen Paddock shot and killed 58 people at the Route 91 Harvest country music festival in Las Vegas. "[My] triggers would be helicopters, sirens and flashing lights."

Those triggers are the sights and sounds that would take Harris back to the scene of the crime, as if he was re-experiencing it.

Harris says that he went to a therapist for about a month and a half after the shooting, and that it helped him get past some of what he was experiencing emotionally. The therapist diagnosed Harris with acute stress disorder (ASD). "She said [working through the acute stress] will lessen the likelihood of [developing] PTSD in the future," Harris says.

Acute stress disorder can occur within the first 30 days of experiencing a traumatic event, while PTSD can

be diagnosed 30 days after such an event, says Andrew Leeds, Ph.D., director of training at the Sonoma Psychotherapy Training Institute in Santa Rosa, California.

The symptoms of ASD overlap those of PTSD; it is simply when they have persisted for more than 30 days that a PTSD diagnosis can be given, according to the National Center for PTSD. Those with the disorders may suffer from flashbacks of a traumatic event, which can occur when they experience similar sights, sounds and odors to those that they did during the original event, making them feel as if it is happening all over again. Their minds become stuck in fight-or-flight mode, and a feeling of anxiety can wash over them.

Harris has experienced challenges with friends who he believes did not understand what he was going through after the shooting. "People back at home [in Chicago] said, 'Get over it; get past it,'" he says. As a result, Harris and those friends did not speak for about a month. He confronted them about their reactions, they apologized and now they do communicate.

Harris's family reacted in the opposite way. "My family was supportive," he says. "I saw them a total of 20 days between October and November."

He says that he and his family members traveled back and forth to see each other in the aftermath of the tragedy. This type of support is important for survivors of traumatic events, as is the maintenance of personal hygiene, which includes eating regular meals, getting good sleep and avoiding excessive use of depressants and stimulants, such as alcohol and caffeine, says Leeds. He suggests that people seek professional help immediately following a horrific event.

For Harris, therapy helped, as has getting a large tattoo on his arm that includes the date of the shooting, a cowboy hat, part of a guitar and 58 lights, each one symbolizing one of the lives that the shooter took during the tragedy. "It's a reminder that I was there for now," he says. "It will [be] more later."

~Susan Lorimor